PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								Application or Docket Number Sowy JP 3 0 - 14 7					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			24					RAT	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			೨ U minus 20=		• 4			X\$ 9)=		OR	X\$18=	72
INDEPENDENT CLAIMS			5 minus 3 =		٠2			X40=				X80=	,
MULTIPLE DEPENDENT CLAIM PI			RESENT					105			OR		160
+ If	the difference	in column 1 is	less than zero, enter "0"			+135					OR	+270=	6.463
••								TOTA	AL.	L	OR	TOTAL	942
CLAIMS AS AMENDED - PART II (Column 1) (Column 2						(Column 3)		SMA	LL I	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT	-	BAT	E /	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 19	Minus	"å	4	= &		X\$ 9	=		OR	X\$18=	
	Independent	. 4	Minus	***	5	30		X40:	_		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 125				+270=	
BEST AVAILABLE COPY								+135	TAL		OR	TOTAL	
								ADDIT. F			OR .	ADDIT. FEE	
AMENDMENT B		(Column 1) CLAIMS		HIGH	IEST	(Column 3)	1 1		_	ADDI-		· · ·	ADDI-
		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATI	E	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**		=		X\$ 9	-		OR	X\$18=	
	Independent	•	Minus	***		<u> -</u>		X40=	-		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135			OR	+270=	
							ı	701				TOTAL	
	(Column 1) (Column 2) (Column 3)								EE		JON ,	ADDIT. FEE	
		(Column 1) CLAIMS		HIGH	EST	(Column 3)	l r		_	ADDI-			ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIO PAID		PRESENT EXTRA		RATE	=	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		2		X\$ 9=	-		OR	X\$18=	
	Independent	•	Minus	***		=	П	X40=		<u> ·</u>	OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	TCLAIM		!	+135:	\dashv				
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270= TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								AL EE			ADDIT. FEE	
	The "Highest Nun	ber Previously Pa	id For" (Total o	rindepend	lent) is the	highest numbe	er fou	nd in the	арр	ropriale bo	in col	umn 1.	